PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003									Application or Docket Number 10/08/02/89 59/2-05-4				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTIT			OR		R THAN ENTITY
TOTAL CLAIMS			7		٠.		٠.	RATE F		FEE	7	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE 385.0		385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			7 minus 20=				_	X\$ 9=			OR	X\$18≃	
INDEPENDENT CLAIMS			minus 3 =		•			X43=			OR	X86=	
ML	JLTIPLE DEPE	NDENT CLAIM P	REŠENT					+145=		·	OR	+290=	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL			OR	TOTAL	•
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									,		.	OTHER	
نہ	20100	(Column 1)		(Colum	nn 2)	(Column 3)		SMALL			OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 7	Minus	- J	0	=		X\$ 9=		X	OR	X\$18=	^
AME	Independent	- 1	Minus	*** '	3	=	- [X43=	1		OR	X86=	X
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	7		OR	+290=	
									#			TOTAL ADDIT, FEE	
			.DDIT. FE	E L		, ,	ODII. PECI						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	ſ	X\$ 9=	T		OR	X\$18=	
AME	Independent	*	Minus	***	OL 4114	=	ľ	X43=	1		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									T		OR	+290=	
TOTAL ADDIT. FEE										∪B Γ	TOTAL ODIT. FEE		
	(Column 1) (Column 2) (Column 3)												
ラし		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOU PAID F	ER USLY	PRESENT EXTRA	Γ	RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	trir		= .		X\$ 9=	T		OR	X\$18=	
	Independent	*	Minus	***		=	r	X43=	t			X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								\dagger		OR		
• 11	If the _ntry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=	
H	**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. I									!	OR A	TOTAL DDIT. FEE	
7	he *Highest Num	ber Previously Paid	For (Total or	Independen	nt) is the	highest number	foun	d in the a	ppro	priate box	in colu	mn 1.	ĺ